## FORM D

U.S. SECURITIES AND EXCHANGE COMMISSION

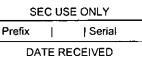
Washington, D.C. 20549

FORM D

1379739

OMB APPROVAL

OMB NUMBER: 3235-0076 Expires: April 30, 2008 Estimated average burden hours per response . . 16.00





## NOTICE OF SALE OF SECURITIES PURSUANT TO REGULATION D, SECTION 4(6), AND/OR UNIFORM LIMITED OFFERING EXEMPTION

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Name of Offering ( check if this is an amendment and name has changed, and indicate change.)							
Midland U.S. QP Fund L.P.							
Filing Under (Check box(es) that apply):  Type of Filing: New Filing	Rule 504 Amendment	Rule 505	Rule 506	Section 4(6)	ULOE		
		A. BASIC IDEN	TIFICATION DATA				
1. Enter the information requested about th	e issuer						
Name of Issuer ( check if this is an amer	ndment and name has	changed, and indica	ite change.)				
Midland U.S. QP Fund L.P							
Address of Executive Offices			•	Street, City, State, Zip Code	(Including Area Code)		
c/o Gerber Taylor Management Co	mpany, One Con	merce Square,	Suite 1900, Memph	is, TN 38103	(901) 526-9750		
Address of Principal Business Operations (if different from Executive Offices)			(Number and	Street, City, State, Zip Code	Telephone Number (Including Area Code)		
Brief Description of Business			Zeor - October (a	(fe.)	-LaboresSED		
investment activities			007 1 S 2000		NOV 0 1 2006		
Type of Business Organization			300	S.	(10 T T L000		
corporation business trust	limited partners limited partners	hip, already formed hip, to be formed	1G0 die	r (please specify):	THUIVISUN TEINANCIAL		
Actual or Estimated Date of Incorporation	or Organization:	Month Year [0 6]		Actual	Estimated		
Jurisdiction of Incorporation or Organization: (Enter two-letter U.S. Postal Service abbreviation for State:  CN for Canada; FN for other foreign jurisdiction)  [D][E]							
GENERAL INSTRUCTIONS							

Federal:

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C. 77d(6).

When To File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where to File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

State:

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

ATTENTION

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predicated on the filing of a federal notice.

A. BASIC IDENTIFICATION DATA

2. Enter the information requested for the following:								
• Each promoter of the issuer, if the issuer has been organized within the past five years;								
Each benefit	• Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the issuer;							
• Each execu								
		·						
• Each gener	al and managing parti	ner of partnership issuers.						
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner			
Full Name (Last name first, if	individual)							
Gerber/Taylor Managem	ent Company			_				
Business or Residence Address	s (Number and Stree	t, City, State, Zip Code)			<del>. =</del> .			
One Commerce Square,	Suite 1900, Mem	phis, TN 38103						
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner			
Full Name (Last name first, if	individual)							
Douglass, Michael J.								
Business or Residence Address	s (Number and Stree	t, City, State, Zip Code)						
One Commerce Square,	Suite 1900, Mem	phis, TN 38103						
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner			
Full Name (Last name first, if	individual)				ividiaging raitiei			
Gerber, Charles C.								
Business or Residence Address	s (Number and Stree	t, City, State, Zip Code)	<u> </u>					
One Commerce Square,	Suite 1900 Mem	nhis TN 38103						
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or			
Full Name (Last name first, if	individual)				Managing Partner			
	marvidany							
Taylor, Robert Andrew Business or Residence Address	s (Number and Stree	t. City. State. Zin Code)						
		•						
One Commerce Square, Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or			
		Belleticial Owner	Z Excessive officer		Managing Partner			
Full Name (Last name first, if	individual)							
Pickens, William E.								
Business or Residence Address	s (Number and Stree	t, City, State, Zip Code)						
One Commerce Square, Suite 1900, Memphis, TN 38103								
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner			
Full Name (Last name first, if	individual)		·					
East, David G.								
Business or Residence Addres	s (Number and Stree	t, City, State, Zip Code)						
One Commerce Square, Suite 1900, Memphis, TN 38103								
Check Box(es) that Apply:	Promoter	Custodial Trustee	Executive Officer	Director	General and/or Managing Partner			
Full Name (Last name first, if individual)								
		B INCODMATIO	N ADOUT OFFEDING		<del></del>			

1.	Has the issuer sold, or does the issuer intend to sell, to non-accredited investors in this offering?								Yes No					
•					Answer	also in Ap	pendix, Col	lumn 2, if fi	ling under <sup>1</sup>	ULOE.				
2.	What is the	he minimu	m investme	ent that will	be accepte	d from any	individual'	,						* <u>\$500,000</u>
•				inimum ma										
		24			•									Yes No
3.				-	-									
4. Enter the information requested for each person who has been or will be paid or given, directly or indirectly, any commission or similar remuneration for solicitation of purchasers in connection with sales of securities in the offering. If a person to be listed is an associated person or agent of a broker or dealer registered with the SEC and/or with a state or states, list the name of the broker or dealer. If more than five (5) persons to be listed are associated persons of such a broker or dealer, you may set forth the information for that broker or dealer only.														
Full Name	e (Last nan	ne first, if i	individual)											
Business	or Residen	ce Address	(Number a	and Street, (	City, State,	Zip Code)						<del></del>		
Name of A	Associated	Broker or	Dealer										<del>-</del>	
States in	Which Pers	on Listed	Has Solicit	ed or Intend	is to Solicit	Purchasers		-						
(Check '														All States
	[AL] [IL]	[AK] [IN]	[AZ] [IA]	[AR] [KS]	[CA] [KY]	[CO] [LA]	[CT] [ME]	[DE] [MD]	[DC] [MA]	[FL] [MI]	[GA] [MN]	[HI] [MS]	[ID] [MO]	
	[MT] [RI]	[NE] [SC]	[NV] [SD]	[NH] [TN]	[NJ] [TX]	[NM] [UT]	[NY] [VT]	[NC] [VA]	[ND] [WA]	[OH] [WV]	[OK] [WI]	[OR] [WY]	[PA] [PR]	
Full Name	e (Last nan	ne first, if	individual)											
						m: 0 1)								
Business	or Residen	ce Address	s (Number a	ind Street,	City, State,	Zip Code)								
Name of A	Associated	Broker or	Dealer											
States in V	Which Pers	on Listed	Has Solicit	ed or Intend	is to Solicit	Purchasers	3							
(Check '	'All States'	or check	individual :	States)										All States
	(AL) (IL)	[AK] [IN]	[AZ] [lA]	[AR] [KS]	[CA] [KY]	[CO] [LA]	[CT] [ME]	(DE) [MD]	[DC] [MA]	(FL) [Mi]	[GA] [MN]	[HI] [MS]	[ID] [MO]	
	[MT] [RI]	[NE] [SC]	[NV] [SD]	[NH] [TN]	[NJ] [TX]	(NM) [UT]	[NY] [VT]	[NC] [VA]	[ND] [WA]	[OH] [WV]	(OK) [WI]	[OR] [WY]	[PA] [PR]	
Full Nam			individual)		,		,		,				<del>`</del>	
Business	Business or Residence Address (Number and Street, City, State, Zip Code)													
<u> </u>		D 1	D. 1				<del></del>							
Name of a	Associated	Broker or	Dealer											
States in '	Which Pers	on Listed	Has Solicit	ed or Intend	ds to Solici	t Purchasers	3							<del></del>
(Check '	'All States'	' or check	individual	States)										All States
(Circon	[AL]	[AK]	[AZ] [IA]	[AR]	[CA] [KY]	[CO] [LA]	[CT] [ME]	[DE]	[DC] [MA]	[FL]	[GA] [MN]	[HI] [MS]	[ID] [MO]	
	[IL] [MT] [RI]	[IN] [NE] [SC]	[NV] [SD]	[KS] [NH] [TN]	[NJ] [TX]	[NM] [UT]	[NY] [VT]	[MD] [NC] [VA]	[ND] [WA]	[MI] [OH] [WV]	[OK] [WI]	[MS] [OR] [WY]	[PA] [PR]	

(Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

1.	Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if answer is "none" or "zero." If the transaction is an exchange offering, check this box $\square$ and indicate in the columns below the amounts of		
	the securities offered for exchange and already exchanged.		
•	Type of Security	Aggregate Offering Price	Amount Already Sold
	Debt	\$	\$
	Equity	\$	\$
	☐ Common ☐ Preferred		
	Convertible Securities (including warrants)	\$	\$
	Partnership Interests		\$
	Other (Specify Limited partnership interests)*	\$250,000,000	\$ <u>49,882,669</u>
	Total*	\$250,000,000	\$ <u>49,882,669</u>
	Answer also in Appendix, Column 3, if filing under ULOE.		
2.	Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."	Number Investors	Aggregate Dollar Amount of Purchases
	Accredited Investors	40	\$49,882,669
	Non-accredited Investors	N/A	\$N/A
	Total (for filings under Rule 504 only)		\$
	Answer also in Appendix, Column 4, if filing under ULOE.		
3.	If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C – Question 1.	Type of	Dollar Amount
	Type of offering	Security	Sold
	Rule 505		\$
	Regulation A		\$
	Rule 504	<del> </del>	\$
	Total	<del></del>	\$
4.	a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the issuer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.		
	Transfer Agent's Fees		\$0
	Printing and Engraving Costs	🛛	\$30
	Legal Fees	⊠	\$25,000
	Accounting Fees		\$0
	Engineering Fees		\$0
	Sales Commissions (specify finders' fees separately)		\$0
	Other Expenses (identify) Miscellaneous (blue, sky fees, duplicating, courier, etc.)		\$0
	Total	🖂	\$25,030
	This is a continuous offering. Therefore, the aggregate offering price could be greater than of	or less than this am	

C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

	C. OFFERING PRICE, NUMBER	R OF INVESTORS, EXPENSES AND USE O	F PROCEEDS			
•	b. Enter the difference between the aggregate Question 1 and total expenses furnished in res is the "adjusted gross proceeds to the issuer.".		*\$249,974,97 <u>0</u>			
5Ì	an estimate and check the box to the left of the	amount for any purpose is not known, furnish				
			Payments to Officers, Directors, &	Payments To		
	Salarian and form		Affiliates	Others		
			<b>\$</b>			
		machinery and equipment	<b>\$</b>			
			□\$			
	Acquisition of other businesses (including the	facilities	□ \$	□ \$		
	that may be used in exchange for the assets or		□\$	□\$		
	• ,		□ \$	□\$		
	• •		□\$			
	Other (specify): to be used as described in Iss		□\$	$\boxtimes$ \$249,974,970		
			□\$	<b>⊠</b> \$249,974,970		
	Total Payments Listed (column totals added)		*🗵 :	\$249,974,970		
		D. FEDERAL SIGNATURE				
follow	ng signature constitutes an undertaking by the i	y the undersigned duly authorized person. If the same to furnish to the U.S. Securities and Exchange non-accredited investor pursuant to paragraph	nge Commission	n, upon written request		
Issuer (F	rint or Type)	Signature	Date			
Midla	nd U.S. QP Fund L.P	Mulil of Donglass		0/17_, 2006		
Name of	Signer (Print or Type)	Title of Signer (Print or Type)	•	·		
Michae	l J. Douglass	Authorized officer of Gerber/Taylor Management Company, General Partner of the Issuer				
	•	* See asterisked comment on p.4.				

ATTENTION
Intentional misstatements or omissions of act constitute federal criminal violations. (See 18 U.S.C. 1001.)